eHealth in Utah

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At the 1st Region VIII HIT Roundtable

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Outline

- State Alliance on eHealth
- Utah's eHealth Vision
- Major eHealth Initiatives
- Healthcare Transparency
- Challenges and opportunities

State Alliance on eHealth

- Bring together governors, attorneys general, state legislators, health officials, insurance commissioners to address state-level health IT issues and challenges to enabling appropriate, interoperable, electronic health information exchange (HIE).
- Two Task Forces:
  - Health Care Practice Task Force
  - Health Information Protection Task Force

eHealth = Utah: Vision

Utah is a place where:

Standard, safe and smart sharing of

accurate electronic health information

results in better health care,

lower cost and

healthier communities.

Demographics for eHealth

- 2.5 million population
  - One of the fast growth states
- 76% population live in the Wasatch Front Area
  - 23 (79%) out of 29 counties in rural areas
  - All counties are designated at least one type of Health Professional Shortage Areas
- Four major hospital systems
  - Intermountain Healthcare provides 46% of hospital beds and 51% of inpatient care
  - 24 out of 49 reporting hospitals with 50 beds or fewer

Key Features of eHeath=Utah

- Utah, an eHealth pioneer
  - Intermountain Healthcare, Bio-medical Informatics at the University of Utah
- Public/private eHealth partnerships
  - UHIN
- Market leadership in HIT
  - State as a facilitator

eHealth Initiatives

1. RHIO Expansion
2. Health Information Security and Privacy
3. Strengthening Telehealth Network
4. Adoption of Electronic Medical Records (EMR)
5. Medicaid Contributions to eHealth
6. Public Health Participation in Clinical Exchanges
7. Center for Excellence in Public Health Informatics
8. Web Applications for Transparency

UHIN, Utah RHIO
- Linking Communities

To Salt Lake City

From Southern Utah

And all points between. . .

UHIN *e*Coverage

- > 450 payer claims in 50 states
- Medicaid and Medicare
- Hospitals (100%)
- Physicians/clinics (95%)
- Laboratories (100%)
- Local health departments (100%)
- Mental health centers (100%)
- Chiropractics (90%)
- Dentists (1/3)

1. RHIO Expansion

AHRQ Contract to transform UHIN into a RHIO and to support the exchange of clinical data:

1. Discharge summary (hospitals ⇔ physicians)
2. History and physical (physicians ⇔ hospitals)
3. Laboratory result (labs ⇔ physicians)

What Has Worked

1. Community-Based Development
2. Incremental Change
3. KISS (Keep It Simple S…)
4. Create Value

What Hasn’t Worked (yet)

- Electronic laboratory reporting of notifiable diseases
- Exchange medication history among health plans, physicians, pharmacies and hospitals

What is Next for UHIN?

- Develop a community clinical message exchange system….?
  - ❖Allow physicians to see all health information about a patient regardless of treatment place
  - ❖Patient permission
  - ❖Brings administrative efficiencies to all users
    - ❖Leverage existing EMR investments.

2. Health Information Security and Privacy (HISPC' Findings)

Led by UDOH, *HealthInsight,* and the Digital Health Service Commission, the project has found:

- Providers obtained patient authorization to disclose health information for all situations except in a medical emergency
- Variations existed regarding the methods used to transmit protected health information (PHI) with Fax transmission being the most common.
- Rules and statues varied with regards to PHI. Entities implemented business practices according to a variety of guidelines.

Solutions

- Advancing Electronic HIE
  - Administrative
    - Create a culture of “appropriate” data sharing
  - Technical
    - Facilitate eHIE by ensuring a robust system of communication
    - Develop standard protocols for authentication and verification of requests for health information
  - Educational
    - Raise consumer/physician awareness of the benefits of accessible health information
  - Policy/Regulatory
    - Identify common use contract/agreements that meet best practice standard
    - Adopt standard language for consent to treat and authorization to disclose

Next Steps

- Implementation
  - Initial 2 month extension received for proposal development and planning
  - Focus on privacy and security aspects of the implementation plan
  - Apply for funding for 6 month deliverables

3. Strengthening Telehealth Network

- 28 sites with a 11-year history
- Critical in connection of small or isolated providers, LHDs, and rural clinics
- Provide e-services in email/internet access, tele-radiology, pharmacy, and distant rapid stroke management
- Cooperated with Utah Educational Network and health libraries for distance training
- Apply for FCC Rural Health Care Pilot Program Grant

Telehealth and RHIO

- Tele-health network evolved into the Utah Governor-appointed Digital Health Services Commission
- Utah Telehealth Network links patients to health care providers across the state, especially in rural areas.
- Utah interoperable solutions proposed that expansion of statewide connectivity would not be established by UHIN, but via Utah Telehealth Network.

4. Adoption of Electronic Medical Records (EMR)

HealthInsight's DOQ-IT Project has helped Utah primary care physician offices overcome barriers to adopting EMR since 2004.

EMR Adoption Rate	2004	2007	2008
Primary Care Practices	30%	52%	Up to 80%

Statewide EMR Initiatives

- CMS is launching a 3-year pay-for-performance Medicare Care Management Performance (MCMP) demonstration program including 150 primary care practice in Utah.
- Utah legislature appropriated $90,000 state funds to promote EMR among Medicaid providers, including specialists.
- Utah Medical Association funded the EMR project to expand DOQ-IT services to specialist.
- Utah Digital Health Services Commission actively promotes digital health initiatives and educational activities.

EMR Diffusion (Need Work)

- Intermountain Healthcare HELP System
- University of Utah Health System
- Central Utah Clinic
- Utah Community Health Centers are adopting EMRs.

5. Medicaid Contributions to eHealth

- A UHIN Member
- All Medicaid providers are the USIIS, Utah Immunization Registry, users
- Medicaid data link with public health data through inclusion of the vital records in the Medicaid Data Warehouse.
- Medicaid data go in the statewide health plan pharmacy database.

Medicaid's Role in eHealth

- Get in the game and stay in the game
- Health data is health data
  - Clinical data are needed to support administrative decision
  - Medicaid needs to support clinical data transaction
- "Is Medicaid ready?" UHIN Partners asked before every initiative
  - Without Medicaid participation, UHIN would not be successful.

Medicaid Contributions to Public Health Informatics:

- Provides matching funds to develop and maintain the Utah Statewide Immunization Information System (USIIS)
- The major sponsor, jointly with commercial HMOs, for the Utah health plan HEDIS public reporting
- Host the Vital Records (birth and death certificates) in Data Warehouse (DW)
- Allow access to DW for other public health programs

6. Public Health Participation In Clinical Exchanges.

- Syndromic surveillance system established during the 2002 Winter Olympics

New systems are in planning:

- Making perinatal EMR's interoperable with the Utah Birth Certificate.
- Exchange of standard immunization records (HL7) between USIIS and clinical EMR's.
- Disease surveillance using electronic laboratory results data.

7. Center for Excellence in Public Health Informatics

- At the UofU and UDOH, funded by CDC. UDOH created an Office of Public Health Informatics
- Joint Projects:
  - Real-time clinical electronic notifiable disease reporting.
  - Research on prevention of deaths and adverse events due to non-illicit drug use.
  - Improved linkage of patient immunization records in the statewide registry (USIIS).
  - Develop integrated public health data resource and analytical master person index

Healthcare Transparency

- eHealth should lead to better healthcare and health outcomes.
- Consumers are active members of eHealth efforts
- Utah legislature has passed two bills to promote public reporting for consumers:
  - SB132 Health Care Consumer's Report ('05)
  - HB 9 Health Care Cost and Quality Data ('07)

Collaborative Agreement
To Promote Health Care Transparency

Among
The Utah Department of Health
The Utah Hospitals & Health Systems Association
HealthInsight

This collaborative agreement establishes a partnership among the Utah Department of Health, the Utah Hospitals & Health Systems Association and *HealthInsight* to promote health care transparency in the state of Utah.

The President of the United States, through Executive Order, directs federal agencies to share with beneficiaries information about prices and quality of health care, to encourage adoption of health information technology (IT) standards, and to develop and identify approaches that facilitate high quality and efficient care.

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Agreed by:

Organization: **Utah Department of Health**	Organization: **Utah Hospitals & Health Systems Association**	Organization: ***HealthInsight***
Name: **David N. Sundwall, M.D.**	Name: **Joseph Krella**	Name: **Marc Bennett**
Title: **Executive Director**	Title: **President/CEO**	Title: **President**
Signature: David N. Sundwall	Signature:	Signature:
Date: 2/14/07	Date: 2/12/07	Date: 2.2.07

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MyHealthCare in Utah

Format page for printing

Topics

- Patient Safety
- >> Find a Doctor
- Verify a License
- File a Complaint
- In the News
- About Us
- Related Sites

How Are We Doing?

Have a suggestion or comment? Let us know how we can improve.

MyHealthCare is designed to help consumers make informed decisions about their medical care.

View Utah Hospital Comparison Reports

Please select a report from list: Go

New **November 2006** ~ New Consumer Reports:

2006 Hospital Comparison Report on Pneumonia Hospitalizations for Adults

2006 Utah Hospital Comparison Report on Maternity and Newborns

Hospitals

UT-PricePoint - Find out how much your hospital charges for many of its procedures

UT-CheckPoint - Find out how your hospital performs in several important quality areas

Where can I find a list of Utah hospitals?

Other Hospital Information

Health Plans

- Which health plan is right for me?
- What are the costs of health insurance?
- Where can I find a health plan in my area?

Long Term Care

http://health.utah.gov/myhealthcare/

Find a doctor in your area

Trusted sites

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CHECKPoint℠

Utah Hospitals Accountable for Quality

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Utah hospitals are committed to sharing information about the quality and safety of the health care services that they deliver in their communities. ***CheckPoint*** provides reliable data on 14 interventions that medical experts agree should be taken to treat heart attacks, heart failure and pneumonia. These measures represent the beginning of more measures that will be added to this site in the future. For an overview of ***CheckPoint***, go to CheckPoint Overview.

About CheckPoint

- Mission
- Project Sponsor
- Participating Hospitals
- Statewide Achievements
- Frequently Asked Questions

Reports

Go To Reports

- About The Measures
- Future Measures
- Definition of Terms

Using These Reports

- What is Quality in Health Care?
- What Does this Mean for My Health?
- Choosing a Hospital
- Choosing a Health Plan
- Create a Better Hospital Experience
- Related Quality Links
- Evidence Based Health Care
- How's Your Health

CheckPoint does:

1. Help Utah citizens learn more about health care.
2. Make evidence-based health information publicly available and understandable.
3. Assist hospitals in continuously improving their performance, and, thereby, improving the overall quality of care provided to Utah citizens.
4. Provide information that employers and insurers can use as they design benefit packages.

CheckPoint does not:

1. Provide a full-picture of the overall health care picture in Utah. CheckPoint is one source; many others are also available and

http://utcheckpoint.org/

Challenges and Opportunities

- *HealthInsight* is coordinating the statewide Value Exchange Initiative.
- UHIN is facilitating discussion on developing a community clinical messaging exchange model.
- Utah Health Data Committee will lead to develop a plan to collect healthcare cost data as mandated by recent legislature.

Challenges in Rural Areas

- EMR is too expensive for most rural clinics to afford.
- Bandwidth is still a major problem.
- Access to specialty care is problematic.
- Need quality IT staff
- Need generators in rural health facilities